ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	IN IONIA A CONTRACTOR OF THE C		
	INITIALS	'^ NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	M	59	38/
RESPONSE FORMALITY REVIEW	171	917-	04-04-01

INDEX OF CLAIMS

_	Rejected Allowed (Through numeral) Canceled Restricted	N
---	--	---

		Hestricted	0.
Claim	Date	Claim	D-11
Final Original		Final	Date
2/4	 	51	\vdash
ROAL -		52	
4011	┝╌┼╌┼╌┼╌┼	53	
80	┡╸╂╼╂╼╂ ╾ ╏	54	
6	╵╸ ┞╾╂╼╂╌╂╌╂╌	55	
80		56	
8		58	
100		59	╼┼╼┾╼
		60	
12		61	
RUH	╼╂╾╂╾╂╼╂╼╏	62	
Mall	╼╂╼╂╼╂╼╁╼┧	63	
15 /	╼╂╼╂╼╂╼╂╼╂	64	
Me		65	
17 0		67	+
18 /	1 1 1	68	┿┼┼┼
20		69	╅╼╂╾╂
21		70	╀╾┼╾┼
22	+-+	71	╀╾┼╾┼
23	+	72	
24	╂═╂═╂═┨	73	
25	╿╌┞╌┨ ╌┩	74	
26	 	75	
27	 	77	
28		78	
30		79	┝╾┼╌┼
31		80	
32		81	
33	╼┼╾┼╾┼╾┤	82	
34		83	
35		85	
36		86	
37		87	╼┼╼┼╼
39		88	╅┪
401		89	╅╅
▔╂▄╂═┼┈┼┈┼┈┼		90	
42	╂╌╂╼╀╼┤╴╷	91	
43	╫╫┼┼┤┤	92	T + + +
44	┊ ┼┼┼┤ ┆	93	
45	┼╌┼╌┤ ╶┤	94	117
46	<u> </u>	96	++1
47		97	╀╌╂╌╂
49		98	┼╌┼╌┼
50	 	99	╂╼╂╼╂╌
	1 1 1 1 1	koo	

] (
Claim	Date
1 4 1 12 1	
Final	
101	┾┾┾ <u>┼</u> ┼ <u>┤</u>
102	┼┼┼┼┼┼
103	╃╼╂═╂ ═╁ <u>╸╁╸</u> ╁╸ <u>╽</u>
104	╎╸╎╸╎╸╎╸╎╸
105	╵╸╎╸┝╸╅╸╁╸╏╸╏
106	┼╸┼╸┼╶┼╶┼╶ ┼ ╶ ┼
107	╿╸ ┦╾╂╾╂╾╂╾╂
108	Ţ ╾ Ţ ╾ Ţ ╾ Ţ ╾ Ţ
109	
110	
111	
112	+-+-+
113	
114	
116	
117	┈┼┼┼┼┼┼
118	╶┼┼┼┼┼┼
119	╺╶┼╶┼┈┼┈┼┈┼┈┼┈┼
120	╶┼╌┼╌┼╌┼╌┼ ╌┼
121	╺┝ ┼┼┼┼
122	╶├─┼─┼┈┼┈┼┈┼┈ ┼
123	
124	
125	
126	+
127	
129	┼-┼-┤-┤- ┤- <u>┤-</u> ┃
130	┞═┞═╂═╂ ╾ ╏ ╾╂ ╸╏
131	╅╸╂╌╂╌╂╌╂ ╌╂ ╸╏╸ ╏
132	┞┈┞┈┞┈┞┈┞┈┞ ┈┤
133	
134	
135	+ + + + -
137	++++
138	+
139	┝ ┼ ┤ ┼ ┤ ┤
140	┞╾ ┦╾╄╾╁ ╾ ╏ ╾┨
141	^{┝╾} ┼╾┼ ╸ ┼╌ ╏ ╌╏
142	╼┾╼┾╼╁╼╁╼╁╼╏
143	┖┼┼┼┼┼┼┼┼ ┼
144	
145	
146	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
147	
148	1
149 150	++++
1.27	_ <u></u>

If more than 150 claims or 10 actions staple-additional sheet here

(LEFT INSIDE)



145